OFFICE OF THE STATE PUBLIC DEFENDER ATTORNEY'S SUMMARY OF EDUCATION AND EXPERIENCE

Name:				
	First	Middl	le Last	
Address:				
	Business			
	Home			
Business P	hone:		Other phone	
E-mail: _				
YOUR LE	GAL EDUCATI	ION:		
Undergradı	uate:		Degree	Date
Law Schoo	1:		Degree	Date
Please note	below any other	relevant graduate, profes	ssional, or vocational educa	ation:
YEAR OF	YOUR ADMIS	SION TO PRACTICE	BEFORE:	
Other Cour				nd year of admission)
which you lineffective	have been admitte assistance?	ed to practice, or, have yo	iplinary action pending, by ou ever been found by a con	
Yes	No	(If yes, please explain	on separate paper)	

YOUR LEGAL EXPERIENCE:

How many years have you been en	gaged in the activ	ve practice of law?		
Please describe any employment ex	xperience with th	e following offices	:	
	Years	Place		
() as a judge				
() as a U.S. Attorney, District Attorney, or Attorney General				
() as a Public Defender _				
() as a City Attorney				
() as a Private Practitioner _				
Number of jury cases tried: (approx	ximate) Civil		Criminal	
Montana District Court			O'IIIIIIIII	
Justice or Municipal Court	-			
Tribal Court				
Other Court (specify)				
U.S. District Court				
Youth Court				
How many criminal felony appoint	ments in the Stat	e of Montana have	you had in the past 3 years?	
Please indicate whether you have s generally describe your experience		of record in any of	the following types of cases and, if	`so,
Involuntary commitment				
Juvenile delinquency (youth co	ourt)			
Dependency and neglect (youtl	h in need of care)			
Guardianship / Conservatorshi	ip			

Please describe below three cases which you believe qualify you to assume direct responsibility for representing either adult defendants charged with felony level offenses, or juveniles charged with delinquency. You should choose cases which proceeded to jury trial. In the event you did not handle any cases through jury

trial, please explain why. (Note: it is not the intent of this question to request disclosure of confidential case information. Rather, we are simply interested in giving you an opportunity to discuss why you have resolved your criminal cases short of trial.)					
YOUR SPECIAL SKILLS / INTERESTS:					
If you believe you have special skills or knowledge which would make you more qualified to handle certain types of cases, please advise:					
() Foreign Language Proficiency					
() Accounting					
() DNA or forensic training					
() Mental health training / experience					
() Chemical dependency training / experience					
() Law enforcement training / experience					
() Cultural sensitivity training					
() Other					
Please let us know if you have a special interest or experience in particular areas of the law or types of cases:					
() Death Penalty					
() Homicide					
() Crimes of Violence					
() Sexual Assaults					
() Drug cases					
() Property Crimes					
() Theft Crimes					
() Juvenile Delinquency					
() Appellate / PCR					
() Mental health law					
() Dependency & Neglect					
· · · · · · · · · · · · · · · · · · ·					

() Other

trial, please explain why. (Note: it is not the intent of this question to request disclosure of confidential case

YOUR CURRENT PROFESSIONAL LIABILITY INSURANCE CARRIER IS:

CONFLICT OF INTEREST DETERMINATION

Please indicate the type of case tracking system you employ to monitor potential conflicts of interest AND indicate whether you can provide that data to the Office of the State Public Defender.

<u>J</u>	JUDICIAL DISTRICT(S) AND/OR COUNTIES IN WHICH YOU ARE WILLING TO WORK:					
<u>R</u>	EFERENCES:					
T	he following are people familiar with my trial skills whom you may call for a reference:					
1.	Name Phone Number					
	·					
3.	·					
<u>S</u>]	ELF CERTIFICATION: Please check ones that are applicable.					
() I believe that I have the experience, education, and training to effectively handle any criminal case to which I am appointed, including complex prosecutions.					
() I believe I have the experience, education, and training to effectively handle any "routine" felony criminal case under the Montana Criminal Code.					
() I believe I have the experience, education, and training to effectively handle juvenile delinquency cases under the Montana Youth Court Act.					
() I believe I have the experience, education, and training to effectively handle criminal misdemeanor cases.					
() In order to gain more experience, I am willing to act in a second chair capacity under the supervision of a senior staff attorney.					
() I believe I have the experience, education, and training to effectively handle civil mental health and					

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Please send this completed form to

developmental disability cases.

Larry Murphy
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Telephone: (406) 496-6088 Fax: (406) 496-6098

Or e-mail to: lamurphy@mt.gov